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ORIGINAL
NOTICE OF SAI
PURSUANT TO

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB NUMBER: 3235-0076
Expires: April 30, 2008
Estimated average burden
hours per response...... 16.00



Name of Offering ( check if this is an amendment and name has changed, and indicate	- ·	06043213
Tremont Long/Short Equity Portfolio Limited - Private Offering of Classes of Shares Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 □ Rule		ULOE
Type of Filing: ☑ New Filing ☐ Amendment		
A. BASIC IDENTIFICATION DATA		
1. Enter the information requested about the issuer		
Name of Issuer ( check if this is an amendment and name has changed, and indicate ch	ange.)	
Tremont Long/Short Equity Portfolio Limited		
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (In	ncluding Area Code)
c/o Walkers SPV Limited, Walkers House, P.O. Box 908 GT, Mary Street, George	(345) 914-4223	
Town, Grand Cayman, Cayman Islands		<del></del>
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (In	ncluding Area Code)
c/o Tremont Partners, Inc., 555 Theodore Fremd Avenue, Suite C-300, Corporate	(914) 925-1146	
Center at Rye, Rye, New York 10580		
Brief Description of Business: Investment in securities		<del></del>
Type of Business Organization ☐ corporation ☐ limited partnership, already formed ☒ other (please sp	ecify): A Cayman Islands	Evennted Company
☐ business trust ☐ limited partnership, an eady formed ☐ business trust	ecity). A Cayman islands	Exempted Company
Month Year		- PROCESSE
rectair of Estimated Bate of meorporation of Organization.	✓ Actual ☐ Estimate	AUG 0 7 2006
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevia	ition for State: F	N WOO O' SUUT
CN for Canada; FN for other foreign jurisdiction)  GENERAL INSTRUCTIONS		- FIONISON-
		FINANCIAL
<b>Federal:</b> Who Must File: All issuers making an offering of securities in reliance on an exemption under l seq. Or 15 U.S.C. 77d(6).	Regulation D or Section 4(	6), 17 CFR 230.501 et
When To File: A notice must be filed no later than 15 days after the first sale of securities in the Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC address after the date on which it is due on the date it was mailed by United States registered or c	at the address given below	w or, if received at that
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, I	D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which musigned must be photocopies of the manually signed copy or bear typed or printed signatures.	st be manually signed. An	ny copies not manually
Information Required: A new filing must contain all information requested. Amendments need any changes thereto, the information requested in Part C, and any material changes from the in Part E need not be filed with the SEC.		
Filing Fee: There is no federal filing fee.		
State: This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULC adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate nowhere sales are to be, or have been made. If a state requires the payment of a fee as a preconce proper amount shall accompany this form. This notice shall be filed in the appropriate states in notice constitutes a part of this notice and must be completed.  ATTENTION	tice with the Securities Adn lition to the claim for the e	ninistrator in each state exemption, a fee in the
Failure to file notice in the appropriate states will not result in a loss of the fe	deral exemption Co	nversely failure to
file the appropriate federal notice will not result in a loss of the federal notice will not result in a loss of an available stop predicated on the filing of a federal notice.		

## Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing general partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ General and/or Check Box(es)that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Managing Partners Full Name (Last name first, if individual) Davis, Preston Business or Residence Address (Number and Street, City, State, Zip Code) c/o Tremont (Bermuda) Limited, Tremont House, 4 Park Road, Hamilton, HM 11, Bermuda ☐ Beneficial Owner Check Box(es)that Apply: ☐ Promoter ☐ Executive Officer ☑ Director ☐ General and/or Managing Partners Full Name (Last name first, if individual) Johnston, Darren Business or Residence Address (Number and Street, City, State, Zip Code) c/o Tremont Partners, Inc., 555 Theodore Fremd Avenue, Suite C-300, Corporate Center at Rye, Rye, New York 10580 Check Box(es)that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partners Full Name (Last name first, if individual) Mitchell, James V. (Number and Street, City, State, Zip Code) Business or Residence Address c/o Tremont Partners, Inc., 555 Theodore Fremd Avenue, Suite C-300, Corporate Center at Rye, Rye, New York 10580 ☐ Beneficial Owner ☐ Executive Officer Check Box(es)that Apply: ☐ Promoter ☐ General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es)that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es)that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es)that Apply: ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or ☐ Promoter ☐ Director Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA

Each promoter of the issuer, if the issuer has been organized within the past five years;

2. Enter the information requested for the following:

				B. IN	<b>FORMAT</b>	ION ABO	UT OFFE	RING				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes No □ ⊠			
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?								\$See	note <sup>1</sup>			
								Yes	Yes No			
3. Does the offering permit joint ownership of a single unit?												
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated person of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A												
Full Name (Last name first, if individual)												
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of	Associated	Broker or	Dealer									
States in Which Person Listed has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)												
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (Last name first, if individual)												
Rusiness	or Residen	ce Address	(Number	and Street	City State	e Zin Code	<del></del>					
Dusiness	or residen	ce Address	(14dilloci	and Street	, City, Stat	c, zip cou	-)					
Name of Associated Broker or Dealer												
States in Which Person Listed has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (Last name first, if individual)												
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer												
States in Which Person Listed has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)												
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

<sup>&</sup>lt;sup>1</sup> Class A & Class AA Shares: \$5,000,000; Class B & Class BB Shares: \$500,000. All minimum investments are subject to the discretion of the board to reduce such amounts, provided that the Board will not reduce the minimum subscription to below \$50,000.

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offing price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero". If the transaction is an exchange offering, check this box \( \Pi\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Type of Security Offering Amount Already Sold Debt..... Equity \$1,000,000,000 \$ 1,860,700 ☐ Common ☐ Preferred Convertible Securities (including warrants)..... \$ Partnership Interests..... \$ Other -Total..... \$ 1,000,000,000 **\$\_1,860,700** Answer also in Appendix, Column 3, if filing under ULOE 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero". Aggregate Number Dollar Amount Investors of Purchases \$ 1,860,700 Accredited Investors.... 3 Non-accredited Investors.... O 0 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Type of offering Security Sold Rule 505..... N/A 0 Regulation A..... N/A 0 Rule 504..... N/A 0 Total..... 0 N/A 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. □ \$ Printing and Engraving Costs....

Legal Fees.

Accounting Fees.

Total.....

**⋈** \$45,000

☒ \$20,000

**⋈** \$ 75,000

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AN	D US	SE OF PROCEE	DS			
•	b. Enter the difference between the aggregate offe Question 1 and the total expenses furnished in redifference is the "adjusted gross proceeds to the issue	esponse to Part C - Question 4.a. the	nis		\$.	999,925,000		
5.	Indicate below the amount of the adjusted gross prodused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate equal the adjusted gross proceeds to the issuer set f above.	for any purpose is not known, furnish te. The total of the payments listed mu	an ıst					
				Payments To Officers, Directors, &		Payments To		
	Salaries and fees			Affiliates \$		Others		
	Purchase of real estate			\$ \$		\$		
	Purchase, rental or leasing and installation of ma			\$ \$		\$ <u>.</u> \$		
	Construction or leasing of plant buildings and fac	• •		\$ <u>.</u> \$		Ф <u> </u>		
			۳	Φ		Φ		
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass							
	issuer pursuant to a merger)			\$		\$		
	Repayment on indebtedness			\$ <u>.</u>		\$ <u>.</u>		
	Working capital			\$		\$		
	Other (specify): <u>Investments</u>			\$	X	\$ 999,925,000		
	Column Totals			\$	☒	\$ 999.925,000		
	Total Payments Listed (column totals added)			⊠ \$99	9.925			
	Total Tay monto Bisioa (votami votato adaba)			<u> </u>	,,,_,,	,		
		D. FEDERAL SIGNATURE						
ol	e issuer has duly caused this notice to be signed by the lowing signature constitutes an undertaking by the ff, the information furnished by the issuer to any non-	issuer to furnish to the U.S. Securities	Con	nmission, upon v	vritten			
		Signature	_	Da	te	1011-06		
Τ	remont Long/Short Equity Portfolio Limited		/	ſ	71	1 Y 12000		
N	Jame of Signer (Print or Type)	Title of Signer (Frint or Type)	_			1 • 1200 0		
Ε	Parren Johnston	Director	<u>၂</u>					
	Intentional misstatements or omissions of fact constitute federal criminal violations (See 18 U.S.C. 1001.)							
	INTENTIONAL MISSIATAMANTS OF AMISSIONS OF	t tact constitute tederal crimin	al v	INIATIONS ISA	צו ב	11 S C 1001 1		